

SPECIAL POWER OF ATTORNEY

KNOW EVERYONE BY THESE PRESENTS, which are intended to constitute a Special Power of Attorney, **THAT I**, _____, having an address at _____, hereby make, constitute and appoint _____, having an address at _____, as my attorney-in-fact TO ACT in my name, place and stead in any way which I could do, if I were personally present, to the extent that I am permitted by law to act through an agent:

(a) to apply for and receive assistance from the Missouri Military Family Relief Fund

To induce any third party to act hereunder, I hereby agree that any third party receiving a duly executed copy or facsimile of this power of attorney may act hereunder, and that revocation or termination hereof shall be ineffective as to such third party unless and until actual notice or knowledge of such revocation or termination shall have been received by such third party. I, for myself and my heirs, executors, legal representatives and assigns, hereby agree to indemnify and hold harmless any such third party from and against any and all claims that may arise against such third party by reason of such third party having relied upon the provisions of this power of attorney.

IN WITNESS WHEREOF, I have executed this power of attorney this ____ day of _____, _____.

STATE OF _____, COUNTY OF _____, ss.

On this ____ day of _____, _____, before me personally came test, to me known to be the individual described in and who executed the foregoing power of attorney, and acknowledged that he executed the same as his free and voluntary act and deed.

IN WITNESS WHEREOF I hereunto set my hand and affixed my official seal at
in said County and State on the date first above written.

Notary Public
My commission expires on _____